Approved for use through 7/91/2008. CMB 0651-002

Under the Perishwork Reduction Act of 1998, no persons the required to respond to a collection of information unless R displays a valid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Dooket Humber Substitute for Form PTO-876 APPLICATION AS FILED - PART I (Oolumn 1) OTHER THAN (Octumn 2) SMALL ENTITY **O**R SMALL ENTITY FOR NUMBER FILED . NUMBER EXTRA BASIC FEE 67 OFR 1.16(a), (b), or (d)) RATE (#) FEE (\$) RATE (1) FEE (1) SEARCH FEE DY OFR 1.(6(4), (7), or (m)) EXAMINATION FEE (BY OFR 1.16(0), (p), or (q1) TOTAL CLAIMS OT OFR 1.18(1) entrus 20 = 25. INDEPENDENT OLAIMS (87 CFR 1.18(N)) x 57 OR F uluma 9. e 108 If the specification and drawings exceed 100 x Jou. APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See FEE (87 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.160) 180 (ED If the difference in column 1 is less than zero, enter 10 in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Cólumn 1) (Column 2) (Column 3) SMALL ENTITY OTHER THAN CLAIMS REMAINING HIGHEST NUMBER SMALL ENTITY PŘESENT RATE (\$) AFTER AMENDMENT ADDI: PREVIOUSLY PAID FOR EXTRA RATE (\$) TIONAL FEB (\$) Total (37 OFR L16(1) TIONAL Minus FEF (\$) Minus OR' 衐 1071 200 Application Size Fee (37, CFR 1.16(s)) OR ٠, FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR. 1.160) 80 る OR TOTAL ADD'L FEE TOTAL ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER REMAINING AFTER PRESENT RATE (\$) ADDI PREVIOUSLY RATE (\$) EXTRA ADDI-TIONAL FEE (\$) PAID FOR TIONAL Total Minus FEE (\$) 窗 ·Χ • ΄ Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 OFR 1.16(1))

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the Highest Number Previously Paid For", IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For", IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For", IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the inclinded to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450,

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

TOTAL ADD'L FEE

OR:

OR

TOTAL